

description as the affection which forms the subject of this paper. In support of this assertion he mentions no less than thirteen synonyms used by alienists of note to describe the particular form of mental disease which he, following Spitzka and Gray, prefers to call delirium grave. That the disease is a very uncommon one is the only detail in which there is absolute unanimity of opinion. The majority are agreed that the affection is peculiar to women, generally attacking them between the ages of twenty-five and forty-five years.

After reviewing the literature on the subject of etiology, the author is of opinion that two groups must be recognised, one of infectious or traumatic origin, with more or less gross or organic structural damage; the other representing the composite and somewhat indeterminate resultant effects of hyperactivity of cell function from non-toxic conditions, dynamic or nutritional.

He then proceeds to give a clear and vivid clinical description of the disease. So accurate is Spitzka's conception and delineation of the disease in question as to warrant, in the author's opinion, the permanent and distinctive association of his name with it. He also quotes Coston's terse and accurate clinical definition as "a very acute febrile disease of the brain, usually fatal, attended by wild delirium, hallucinations, and great disturbance of motor functions!" Pathologically, Pritchard recognises two distinct groups of this disease corresponding to the two etiological groups before described. The diagnosis of a typical example of this disease should present no difficulty. The prognosis is extremely grave, most writers agreeing that recovery never occurs, and that death usually takes place. Those who escape death pass into a state of more or less marked dementia which is progressive. The author has found no instance in the literature of a second attack.

The treatment should be founded broadly upon the basis of combined etiological and pathological findings.

In conclusion, Pritchard presents a detailed and graphic history of a fatal case occurring in a patient with whom he had been intimately acquainted for many years, and appends the report of the autopsy in her case.

A. W. WILCOX.

Graves's Disease and its Relation to the Psychoses. (*Medicine, March, 1904.*) Rogers, A. W.

This article contains an analysis of thirteen cases of Graves's disease complicated by various forms of insanity observed during the passing of six hundred patients through the Milwaukee Sanatorium during a period of a little over five years.

Practically all these cases presented a neuropathic or psychopathic history, which the author believes to exist in nearly every case of Graves's disease. He is of opinion that this disease and insanity are only manifestations of the same vicious condition underlying an unstable constitution; thus we can scarcely speak of either as a complication of the other, but rather consider insanity as a further development of the neurasthenic and hysterical conditions observed in even the mildest cases of Graves's disease—the psychosis developing in the more unstable.

The cardinal physical symptoms were not affected by the mental complications in the case of any of his patients. He agrees with the majority of authorities that although there is no characteristic psychosis complicating Graves's disease, types of mania are found in over three-fourths of such cases.

In conclusion, he states that although Graves's disease may complicate and usually aggravates the mental disease, yet it does not in the average case make the prognosis less favourable.

A. W. WILCOX.

On Contrary Actions. (Journ. of Nerv. and Ment. Dis., Jan., 1904.)
Pick, A. (Prague).

Professor Pick, in this paper, details at length a case showing marked contrary actions, the so-called "reversals" described by S. Weir Mitchell in the April of the previous year in the same journal.

The latter author showed that the condition might manifest itself in two different forms: either the opposite of the thing willed was done, or else what it was meant to do was done in a way which reversed the usual manner of doing it. Pick thinks that the first class, however, permits of further sub-division, depending whether a delusion or an imperative idea is at the bottom of the condition. His own case, he says, corresponds to the former, while apparently most of the others in literature, of which he shortly recapitulates all that have come to his knowledge, have some imperative idea to account for them.

A. W. WILCOX.

Multiple Sclerosis with Dementia: a Contribution to the Combination Form of Multiple Sclerosis and Dementia Paralytica. (Amer. Journ. of the Med. Sci., Dec., 1903.) Hunt, J. R.

This is an interesting case of the extremely rare combined or mixed form of these two diseases. The author has only found seven recorded cases, of which he gives abstracts of the clinical histories, and of the pathological findings, in the six in which an autopsy was made.

His own case was that of a woman, fifty-three years of age, presenting the symptoms of multiple sclerosis followed by dementia. On admission she showed spastico-ataxic gait, nystagmus, ataxic and intention tremor of arms, impulsive laughter, syllabic speech, and double optic neuritis. Her symptoms dated back for four years. Mentally there was considerable enfeeblement and much impairment of the memory, which increased and terminated in dementia. She died four years after her admission.

At the autopsy thickening of the calvarium was found, opaque and thickened meninges, marked atrophy of the frontal lobes, granular epidymitis and dilatation of the ventricles. Disseminated plaques of sclerosis were present in the brain, cerebellum, pons, medulla, and cord. Histologically the characteristics of general paralysis and of disseminated sclerosis were found.

It is of interest to note that in none of the recorded cases with autopsy was this combination form recognised clinically.

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